

MONTGOMERY COUNTY COMMISSION ON HEALTH Hybrid In-Person and Virtual Meeting via Zoom September 15, 2022 Meeting Minutes

Members Present: Jonathan Arias, Alana Aronin, Brent Berger, Elliott Brown, Marcela Campoli, Desiree de la

Torre, Crystal DeVance-Wilson, Susan Emery, Cara Grant, Jessica Kronstadt, Gabriela Lemus

Members Absent: Dr. James Bridgers, Tara Clemons, Kendra Harris, Adam Lustig

County Council Staff: Essie McGuire

DHHS Staff: Felicia Hugee, Dr. Christopher Rogers, Robyn Simmons, Meghan Sontag

AGENDA ITEMS	/PRESENTER	ACTION ITEMS /RESPONSIBLE PARTY
Meeting call to	Order, Approval of Minutes, COH FY22 Reflections – Crystal DeVance-	
Wilson, Chair		Add the FY22 COH
		Annual Report to the
• The me	eeting was called to order at 5:11 p.m. The COH Chair welcomed members,	October agenda for
staff ar	nd guests. All present introduced themselves.	approval- COH Staff
	aff person Meghan Sontag was introduced and welcomed by all. Robyn	
	ns will continue performing staff duties through October and Meghan will	
	full staff responsibilities in November. Crystal thanked Robyn for acting as	
staff ar	nd Felicia Hugee and Magda Brown for performing other duties until the	
positio	n was filled.	
 Due to 	the need for a quorum, the Annual Report will be on the October meeting	
agenda	a for approval. The draft will be shared with Council for the annual Board of	
Health	Meeting which the Chair and staff will attend.	
 Upcom 	ing meetings are October 20 th and November 17 th	
<u>A MOTION</u> was made by Marcela Campoli to approve the June 16, 2022 minutes. The		
motion was sec	onded by Brent Berger. The minutes were unanimously approved	
MCDHHS Healtl	h Officer's Report – Dr. Christopher Rogers on behalf of Dr. James C. Bridgers	
_	gers discussed the Health Officer's priorities for FY23 and stated that if	
needed	there can be follow up discussions about them. Some of the priorities are:	
0	Senior Planning Specialist (data specialist) per COH's advocacy letter in	
	FY22. Such a position will enhance data sharing and decision making with	
	community partners.	
0	Healthy snacks in vending machines-goal is implementation in both public	
	and private settings.	
0	Community Health Workers-need to increase numbers to improve access	
	to dental services and address the medical and non-medical determinants	
	of health.	
0	Program Evaluation	

	 Integrating newcomers in the County into a fragile healthcare system. There are opportunities to address this in maternal and child health care. Also discussed is the State's Healthy Babies Equity Act that will provide Medicaid for non-citizen pregnant women. This could potentially free up funds currently allocated to the Maternity Partnership Program for other public health purposes. Behavioral Health and somatic health integration across DHHS programs. 	
Policy & Stra	ategy Officer Updates – Dr. Christopher Rogers, Policy & Strategy Officer	
w D SC TI O C D C C C C C C C C C C C C C C C C C	r. Rogers said that the COH Chair or Vice Chair may email him directly if they ould like him to relay any specific COH concerns to the Health Officer. r. Rogers said that he is also willing to provide presentations to the COH or chedule presenters for COH meetings to respond to COH interests. There was a general discussion about the Colesville Center and potential opportunities for a mix of DHHS and community services if the facility is enovated. Tr. Rogers said that he would have a COVID-19 Update document and a Monkey ox document sent to the commissioners following the meeting.	Magda Brown will email the COVID-19 Update and Monkey Pox documents to the commissioners.
COH's role a	nd its implementation – Chair	
foc pro She mo pro Dr. The fina wit The pre mig in t Jon adv be Hui The test	stal discussed her desire for the COH to work efficiently and productively using on gaps and deficiencies. She presented slides with an overview of the cess to do this. also discussed an idea to meet with one of the five PHS division heads each in the between the months of October 2022 and February 2023 to discuss gram outcomes. She said the plan would be to share questions for them with Rogers ahead of time. a current PHS organization chart was requested. be Chair discussed the COH's FY23 priorities and stated that she would send the all priorities statement to staff to meet the DHHS due date for Council's meeting in BCCs on October 27 ^{th.} be chair would like to have COH's FY24 priorities ready in May or June with a liminary draft completed in April. Jessica Kronstadt mentioned that an issue with be aligning with DHHS' priorities if they have not yet set theirs at that point time. athan Arias discussed that there is confusion about the COH role of not just rocating for DHHS priorities but for the entire community. This could potentially in conflict with DHHS. He would like the COH to invite the Council's Health and man Services Committee Chair to a future meeting to discuss this topic. Chair discussed the COH's advocacy strategy which will include letter writing, timony, research, education and outreach via liaisons to other BCCs.	Staff will request the current org. charge from the Health Officer's EAA and provide it to the to the COH Chair.
The Chair ex	plained the three FY23 priorities which are Public Health Administration, tal Health and Education and Access to Care and the goals for the breakout emissioners present joined one of these break out groups and reported back to	

Jessica Kronstadt, who was the lead for the Public Health Administration breakout group, mentioned some updates that could be made to the FY23 Priorities Statement. She said she would provide the changes to the Chair. It was discussed that after new members are appointed, these priorities will be discussed	Jessica will provide her changes to the Chair and the chair will provide the final priorities document to staff prior to the
during their orientation to the COH.	DHHS due date of 10/1/22.
Adjournment	
The Chair adjourned the meeting at 7:56 p.m.	